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|                      | Class | Subclass |
| ISSUE CLASSIFICATION |       |          |

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PATENT NUMBER

## U.S. UTILITY Patent Application

|                                    |             |
|------------------------------------|-------------|
| O.I.P.E.<br>AK<br>SCANNED TR4 Q.A. | PATENT DATE |
|------------------------------------|-------------|

|                              |                 |              |                   |                  |                   |
|------------------------------|-----------------|--------------|-------------------|------------------|-------------------|
| APPLICATION NO.<br>09/931711 | CONT/PRIOR<br>D | CLASS<br>005 | SUBCLASS<br>81.12 | ART UNIT<br>3628 | EXAMINER<br>CRUSE |
|------------------------------|-----------------|--------------|-------------------|------------------|-------------------|

TS Donald Brown

Personal lift aid

**TITLE**

CIP - ARS2

Doc PCT-US/01/41782

PTO-2040  
12/89

**ISSUING CLASSIFICATION**

[illegible]

|   |  |             |            |                                   |                      |
|---|--|-------------|------------|-----------------------------------|----------------------|
| <input type="checkbox"/> <b>TERMINAL<br/>DISCLAIMER</b>   | <b>DRAWINGS</b>                              |             |            | <b>CLAIMS ALLOWED</b>             |                      |
|   | Sheets Drwg.                                 | Figs. Drwg. | Print Fig. | Total Claims                      | Print Claim for O.G. |
| <input type="checkbox"/> The term of this patent<br>subsequent to _____ (date)<br>has been disclaimed.  | _____<br>(Assistant Examiner) (Date)         |             |            | <b>NOTICE OF ALLOWANCE MAILED</b> |                      |
|   |  |             |            |                                   |                      |
| <input type="checkbox"/> The term of this patent shall<br>not extend beyond the expiration date<br>of U.S Patent. No. _____<br>_____<br>_____ | _____<br>(Primary Examiner) (Date)           |             |            | <b>ISSUE FEE</b>                  |                      |
|   |  |             |            | Amount Due                        | Date Paid            |
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